

## **OCCUPATIONAL LICENSE PACKET**

## Occupational License Checklist Application for Occupational License Information Sheet

Occupational License Checklist
<ul> <li>Verify zoning (Code Enforcement Office)</li> <li>Certificate of Occupancy (Code Enforcement Office)</li> <li>Completed application</li> <li>Check for all applicable Business Authorization/ID Numbers         <ul> <li>(Items A, B, C, D will be required for licenses)</li> <li>Health Permit, if applicable (attach copy)</li> <li>License trade approval letter, if applicable (attach copy)</li> <li>Non-profit 501(c)3, if applicable (attach copy)</li> </ul> </li> </ul>
Small Business Administration offers a wealth of knowledge and information on starting and continuing a business. Check out their website for further information. https://www.sba.gov/ Or a local Small Business Development Center: https://www.nsula.edu/sbdc/
Comments:



## **APPLICATION FOR OCCUPATIONAL LICENSE**

Date of Application:		Date Opened:			
Application is requir	ed for: (check all that apply)				
☐ New Business	☐ Purchase of Existing Business	☐ Chain Store	Number of s	tores	
Name of New Business	:				
Name of Prior Business	s (if applicable):				
Nature of Business – D	escription of Sale or Activities:				
Location Address:	Phone Number:				
Mailing Address:					
Point of Contact Name	t of Contact Name: Phone Number:				
Business Owner's Nam	e:	Phone Number:			
Business Owner's Addr	ess:				
Type of Ownership:	(check one)				
☐ Sole Proprietorship	☐ Partnership ☐ Ll	.C – Limited Liability Cor	poration	☐ Corporation	
□ Non-Profit	☐ Other:				
Business Authorizations/ I.D. Numbers (where applicable):					
C. Federal Emplo D. Certificate of 0 E. Health Permit F. License trade G. Non-Profit 500  Building Owner's Co	e I.D. Number:  byer I.D. or Owner's SSN:  Cccupancy Number:  (attach copy):  approval letter (attach copy):  1(c)3 Number:				
Owner's Address:		Contact Phone	Number:		
Mailing Address:			_		

Authorization:	
I affirm that the information given on this application is true ownership, operation, and/or address immediately.	and correct. I will report any change in business
Signature of Applicant	Date
Signature of Preparer	Date

Initial fee is \$50.00; renewals are based upon gross income.

## **Occupational License Information Sheet**

In order to obtain a new Occupational License for the City of Leesville, the following steps must be taken, if applicable, before submitting the application:

Obtain Occupational License packet and return to cashier to pay fee:
City of Leesville, Finance Department
401 Nolan Trace
337-404-4098/4099
Verify zoning:
Obtain a Certificate of Occupancy:
City of Leesville-Code Enforcement Office (Kimberly Beery)
401 Nolan Trace
337-404-4103
Obtain a local Sales & Use Tax number:
Vernon Parish Sales Tax Department
117 Belview Rd
337-239-1631
Obtain a state sales tax number:
http://revenue.louisiana.gov/
Click on LaTAP link
Obtain a Federal Tax I.D. number (if not using Social Security number):
https://www.irs.gov/businesses
Obtain a Board of Health Permit, if applicable, (required by City Inspector prior to obtaining of Certificate of
Occupancy):
Vernon Parish Health Unit, Office of Public Health
406 W. Fertitta Blvd.
337-238-6410
Obtain City Inspection and Building Permits, if necessary:
MHI Construction
512 S. 3 <sup>rd</sup> St
337-404-4081
License trade applicants (electricians, etc.) must obtain an approval letter:
MHI Construction
512 S. 3 <sup>rd</sup> St
337-404-4081
Obtain a Non-profit 501(c)3 number, if applicable:
http://revenue.louisiana.gov/